

1999 DRAFTING REQUEST

Senate Substitute Amendment (SSA-SB417)

Received: **03/15/2000**

Received By: **kahlepj**

Wanted: **Today**

Identical to LRB:

For: **Judy Robson (608) 266-2253**

By/Representing: **Kathy**

This file may be shown to any legislator: **NO**

Drafter: **kahlepj**

May Contact:

Alt. Drafters:

Subject: **Insurance - health**

Extra Copies:

Pre Topic:

No specific pre topic given

Topic:

Using general purpose revenue to maintain HIRSP premiums at current rate

Instructions:

See Attached

Drafting History:

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/?	kahlepj 03/15/2000	csicilia 03/15/2000		_____			
/1	kahlepj 03/20/2000	csicilia 03/21/2000	haugeca 03/15/2000	_____	lrb_docadmin 03/15/2000	lrb_docadmin 03/15/2000	
/2			jfrantze 03/21/2000	_____	lrb_docadmin 03/21/2000	lrb_docadmin 03/21/2000	

FE Sent For:

<END>

03/15/2000 12:42:28 PM

Page 1

1999 DRAFTING REQUEST

Senate Substitute Amendment (SSA-SB417)

Received: 03/15/2000

Received By: kahlepj

Wanted: Today

Identical to LRB:

For: Judy Robson (608) 266-2253

By/Representing: Kathy

This file may be shown to any legislator: NO

Drafter: kahlepj

May Contact:

Alt. Drafters:

Subject: Insurance - health

Extra Copies:

Pre Topic:

No specific pre topic given

Topic:

Using general purpose revenue to maintain HIRSP premiums at current rate

Instructions:

See Attached

Drafting History:

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/?	kahlepj 03/15/2000	csicilia 03/15/2000					
/1		1/2 gj 3/21 00	haugeca 03/15/2000		lrb_docadmin 03/15/2000	lrb_docadmin 03/15/2000	

FE Sent For:

<END>

03/15/2000 09:37:30 AM
Page 1

1999 DRAFTING REQUEST**Senate Substitute Amendment (SSA-SB417)**Received: **03/15/2000**Received By: **kahlepj**Wanted: **Today**

Identical to LRB:

For: **Judy Robson (608) 266-2253**By/Representing: **Kathy**This file may be shown to any legislator: **NO**Drafter: **kahlepj**

May Contact:

Alt. Drafters:

Subject: **Insurance - health**

Extra Copies:

Pre Topic:

No specific pre topic given

Topic:

Using general purpose revenue to maintain HIRSP premiums at current rate

Instructions:

See Attached

Drafting History:

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
1?	kahlepj	1 cjs 3/15 00	CH 3-15	CH 3-15 200			

FE Sent For:

<END>

3-15-00

6-2253

Kathy - Robson's office

SB 417

sub to ↑

HIRSP GPR

- first draw
to pay premiums

- 1) GPR to maintain HIRSP rate at rate in 1999-2000 fiscal yr. 150% of standard plan
60% of program cost
then GPR goes to ^{plan} cost

for

GPR makes up to 150%

surplus

Kahler, Pam

From: Soderbloom, Kathy
Sent: Wednesday, March 15, 2000 9:51 AM
To: Kahler, Pam
Subject: SB417 Sub

Pam,

Just to clarify a point. To determine the rates and GPR needed, the dept. would establish 150% of the standard plan for Plan 1 and Plan 2, as required under 149.143 (1)(b)1.a.. If this rate for either plan exceeds the current rate charged, GPR will pick up the difference.

If this total is insufficient to pay 60% of plan costs, GPR will pick up the difference.

Thanks,

Kathy

Section #. 149.143 of the statutes

149.143 Payment of plan costs. (1) The department shall pay or recover the operating costs of the plan from the appropriation under s. 20.435 (4) (v) and administrative costs of the plan from the appropriation under s. 20.435 (4) (u). For purposes of determining premiums, insurer assessments and provider payment rate adjustments, the department shall apportion and prioritize responsibility for payment or recovery of plan costs from among the moneys constituting the fund as follows:

(a) First from the moneys transferred to the fund from the appropriation account under s. 20.435 (4) (af).

(b) The remainder of the costs as follows:

1. A total of 60% from the following sources, calculated as follows:

a. First, from premiums from eligible persons with coverage under s. 149.14 set at 150% of the rate that a standard risk would be charged under an individual policy providing substantially the same coverage and deductibles as are provided under the plan, including amounts received for premium and deductible subsidies under s. 149.144 and under the transfer to the fund from the appropriation account unders. 20.435 (4) (ah), and from premiums collected from eligible persons with coverage under s. 149.146 set in accordance with s. 149.146 (2) (b).

b. Second, from moneys specified under sub. (2m), to the extent that the amounts under subd. 1. a. are insufficient to pay 60% of plan costs.

c. Third, by increasing premiums from eligible persons with coverage under s. 149.14 to more than 150% but not more than 200% of the rate that a standard risk would be charged under an individual policy providing substantially the same coverage and deductibles as are provided under the plan, including amounts received for premium and deductible subsidies under s. 149.144 and under the transfer to the fund from the appropriation account unders. 20.435 (4) (ah), and by increasing premiums from eligible persons with coverage under s. 149.146 in accordance with s. 149.146 (2) (b), to the extent that the amounts under subd. 1. a. and b. are insufficient to pay 60% of plan costs.

d. Fourth, notwithstanding subd. 2., by increasing insurer assessments, excluding assessments under s. 149.144, and adjusting provider payment rates, excluding adjustments to those rates under s. 149.144, in equal proportions and to the extent that the amounts under subd. 1. a. to c. are insufficient to pay 60% of plan costs.

2. A total of 40% as follows:

a. Fifty percent from insurer assessments, excluding assessments under s. 149.144.

b. Fifty percent from adjustments to provider payment rates, excluding adjustments to those rates under s. 149.144.

(2) (a) Prior to each plan year, the department shall estimate the operating and administrative costs of the plan and the costs of the premium reductions under s. 149.165 and the deductible reductions under s. 149.14 (5) (a) for the new plan year and do all of the following:

1. a. Estimate the amount of enrollee premiums that would be received in the new plan year if the enrollee premiums were set at a level sufficient, when including amounts received for premium and deductible subsidies under s. 149.144 and under the transfer to the fund from the appropriation account under s. 20.435 (4) (ah) and from premiums collected from eligible persons with coverage under s. 149.146 set in accordance with s. 149.146 (2) (b), to cover 60% of the estimated plan costs for the new plan year, after deducting from the estimated plan costs the amount available for transfer to the fund from the appropriation account under s. 20.435 (4) (af) for that plan year.

b. Estimate the amount of enrollee premiums that will be received under sub. (1) (b) 1. a.

2. After making the determinations under subd. 1., by rule set premium rates for the new plan year, including the rates under s. 149.146 (2) (b), in the manner specified in sub. (1) (b) 1. a. and c. and such that a rate for coverage under s. 149.14 is not less than 150% nor more than 200% of the rate that a standard risk would be charged under an individual policy providing substantially the same coverage and deductibles as are provided under the plan.

3. By rule set the total insurer assessments under s. 149.13 for the new plan year by estimating and setting the assessments at the amount necessary to equal the amounts specified in sub. (1) (b)

1. d. and 2. a. and notify the commissioner of the amount.

4. By the same rule as under subd. 3. adjust the provider payment rate for the new plan year by estimating and setting the rate at the level necessary to equal the amounts specified in sub. (1) (b)

1. d. and 2. b. and as provided in s. 149.145.

(b) In setting the premium rates under par. (a) 2., the insurer assessment amount under par. (a) 3. and the provider payment rate under par. (a) 4. for the new plan year, the department shall include any increase or decrease necessary to reflect the amount, if any, by which the rates and amount set under par. (a) for the current plan year differed from the rates and amount which would have equaled the amounts specified in sub. (1) (b) in the current plan year.

(2m) (a) The department shall keep a separate accounting of the difference between the following:

1. The amount of premiums received in a plan year from all eligible persons, including amounts received for premium and deductible subsidies.

2. The amount of premiums, including amounts received for premium and deductible subsidies, necessary to cover 60% of the plan costs for the plan year, after deducting the amount transferred to the fund from the appropriation account under s. 20.435 (4) (af).

(b) Any amount by which the amount under par. (a) 1. exceeds the amount under par. (a) 2. may be used only as follows:

1. To reduce premiums in succeeding plan years as provided in sub. (1) (b) 1. b. For eligible persons with coverage under s. 149.14, premiums may not be reduced below 150% of the rate that a standard risk would be charged under an individual policy providing substantially the same coverage and deductibles as are provided under the plan.

2. For other needs of eligible persons, with the approval of the board.

(3) (a) If, during a plan year, the department determines that the amounts estimated to be received as a result of the rates and amount set under sub. (2) (a) 2. to 4. and any adjustments in insurer assessments and the provider payment rate under s. 149.144 will not be sufficient to cover plan costs, the department may by rule increase the premium rates set under sub. (2) (a) 2. for the remainder of the plan year, subject to s. 149.146 (2) (b) and the maximum specified in sub. (2) (a) 2., by rule increase the assessments set under sub. (2) (a) 3. for the remainder of the plan year, subject to sub. (1) (b) 2. a., and by the same rule under which assessments are increased adjust the provider payment rate set under sub. (2) (a) 4. for the remainder of the plan year, subject to sub. (1) (b) 2. b.

(b) If the department increases premium rates and insurer assessments and adjusts the provider payment rate under par. (a) and determines that there will still be a deficit and that premium rates have been increased to the maximum extent allowable under par. (a), the department may further adjust, in equal proportions, assessments set under sub. (2) (a) 3. and the provider payment rate set under sub. (2) (a) 4., without regard to sub. (1) (b) 2.

(3m) Subject to s. 149.14 (4m), insurers and providers may recover in the normal course of their respective businesses without time limitation assessments or provider payment rate adjustments used to recoup any deficit incurred under the plan.

(4) Using the procedure under s. 227.24, the department may promulgate rules under sub. (2) or (3) for the period before the effective date of any permanent rules promulgated under sub. (2) or (3), but not to exceed the period authorized under s. 227.24 (1) (c) and (2). Notwithstanding s. 227.24 (1) and (3), the department is not required to make a finding of emergency.

(5) (a) Annually, no later than April 30, the department shall perform a reconciliation with respect to plan costs, premiums, insurer assessments and provider payment rate adjustments based on data from the previous calendar year. On the basis of the reconciliation, the department shall make any necessary adjustments in premiums, insurer assessments or provider payment rates for the fiscal year beginning on the first July 1 after the reconciliation, as provided in sub. (2) (b).

(b) Except as provided in sub. (3) and s. 149.144, the department shall adjust the provider payment rates to meet the providers' specified portion of the plan costs no more than once annually. The department may not determine the adjustment on an individual provider basis or on the basis of provider type, but shall determine the adjustment for all providers in the aggregate.

History: 1997 a. 27; 1999 a. 9.

Section #. 20.435 (4) of the statutes

20.435 (4) HEALTH SERVICES PLANNING, REGULATION AND DELIVERY; HEALTH CARE FINANCING. (a) *General program operations.* The amounts in the schedule for general program operations, including health care financing regulation, administration and field services.

(af) *Health insurance risk-sharing plan; transfer to fund for costs.* The amounts in the schedule to be paid into the health insurance risk-sharing plan fund for paying a portion of the operating costs of the health insurance risk-sharing plan under ch. 149.

(ah) *Health insurance risk-sharing plan; transfer to fund for premium and deductible reduction subsidy.* Biennially, the amounts in the schedule to be paid into the health insurance risk-sharing plan fund for the purpose of subsidizing premium reductions under s. 149.165 and deductible reductions under s. 149.14 (5) (a).

(b) *Medical assistance program benefits.* Biennially, the amounts in the schedule to provide the state share of medical assistance program benefits administered under s. 49.45, to provide medical assistance program benefits administered under s. 49.45 that are not also provided under par. (o), to fund the pilot project under s. 46.27 (9) and (10), to provide the facility payments under 1999 Wisconsin Act 9, section 9123 (9m), to fund services provided by resource centers under s. 46.283 and for services under the family care benefit under s. 46.284 (5). Notwithstanding s. 20.002 (1), the department may transfer from this appropriation to the appropriation under sub. (7) (kb) funds in the amount of and for the purposes specified in s. 46.485. Notwithstanding ss. 20.001 (3) (b) and 20.002 (1), the department may credit or deposit into this appropriation and may transfer between fiscal years funds that it transfers from the appropriation under sub. (7) (kb) for the purposes specified in s. 46.485 (3r). Notwithstanding s. 20.002 (1), the department may transfer from this appropriation to the appropriation account under sub. (7) (bd) funds in the amount and for the purposes specified in s. 49.45 (6v).

(bc) *Health care for low-income families.* As a continuing appropriation, the amounts in the schedule for the badger care health care program for low-income families under s. 49.665.

(ma) *Federal project aids.* All moneys received from the federal government or any of its agencies for specific limited term projects of aids to individuals or organizations, to be expended for the purposes specified.

(md) *Federal block grant aids.* All block grant moneys received from the federal government or any of its agencies for aids to individuals or organizations, other than for specific limited term projects and continuing programs, to be expended for the purposes specified.

(n) *Federal program operations.* All moneys received from the federal government or any of its agencies for the state administration of continuing programs, to be expended for the purposes specified.

(na) *Federal program aids.* All moneys received from the federal government or any of its agencies for continuing programs of aids to individuals or organizations, to be expended for the purposes specified.

(o) *Federal aid; medical assistance.* All federal moneys received for meeting costs of medical assistance administered under ss. 46.284 (5), 49.45 and 49.665, to be used for those purposes.

(p) *Federal aid; health care for low-income families.* All federal moneys received for the badger care health care program for low-income families under s. 49.665, to be used for that purpose.

(pa) *Federal aid; medical assistance contracts administration.* All federal moneys received for the federal share of the cost of contracting for payment and services administration and reporting, to reimburse insurers for their costs under s. 49.475 and for services of resource centers under s. 46.283.

(u) *Health insurance risk-sharing plan; administration.* Biennially, from the health insurance risk-sharing plan fund, the amounts in the schedule for the administration of ch. 149, subject to s. 149.143 (2m).

(v) *Health insurance risk-sharing plan; program benefits.* All moneys received by the health insurance risk-sharing plan fund, except for moneys appropriated under par. (u), for the operating costs of the health insurance risk-sharing plan under ch. 149, subject to s. 149.143 (2m).

History: 1971 c. 125 ss. 138 to 155, 522 (1); 1971 c. 211, 215, 302, 307, 322; 1973 c. 90, 198, 243; 1973 c. 284 s. 32; 1973 c. 308, 321, 322, 333, 336; 1975 c. 39 ss. 153 to 173, 732 (1), (2); 1975 c. 41 s. 52; 1975 c. 82, 224, 292; 1975 c. 413 s. 18; 1975 c. 422, 423; 1975 c. 430 ss. 1, 2, 80; 1977 c. 29 ss. 236 to 273, 1657 (18); 1977 c. 112; 1977 c. 203 s. 106; 1977 c. 213, 233, 327; 1977 c. 354 s. 101; 1977 c. 359; 1977 c. 418 ss. 129 to 137, 924 (18) (d), 929 (55); 1977 c. 428 s. 115; 1977 c. 447; 1979 c. 32 s. 92 (11); 1979 c. 34, 48; 1979 c. 102 s. 237; 1979 c. 111, 175, 177; 1979 c. 221 ss. 118g to 133, 2202 (20); 1979 c. 238, 300, 331, 361; 1981 c. 20 ss. 301 to 356b, 2202 (20) (b), (d), (g); 1981 c. 93 ss. 3 to 8, 186; 1981 c. 298, 314, 317, 359, 390; 1983 a. 27 ss. 318 to 410, 2202 (20); 1983 a. 192, 199, 245; 1983 a. 333 s. 6; 1983 a. 363, 398, 410, 427; 1983 a. 435 ss. 2, 3, 7; 1983 a. 538; 1985 a. 24, 29, 56, 73, 120, 154, 176, 255, 281, 285, 332; 1987 a. 27, 339, 368, 398, 399, 402; 1987 a. 403 ss. 25, 256; 1987 a. 413; 1989 a. 31, 53; 1989 a. 56 ss. 13, 259; 1989 a. 102; 1989 a. 107 ss. 11, 13, 17 to 37; 1989 a. 120, 122, 173, 199, 202, 318, 336, 359; 1991 a. 6, 39, 189, 269, 275, 290, 315, 322; 1993 a. 16, 27, 76, 98, 99, 168, 183, 377, 437, 445, 446, 450, 469, 479, 490, 491; 1995 a. 27 ss. 806 to 961r. 9126 (19); 1995 a. 77, 98; 1995 a. 216 ss. 26, 27; 1995 a. 266, 276, 289, 303, 404, 417, 440, 448, 464, 468; 1997 a. 27 ss. 211, 214, 216, 217, 527 to 609; 1997 a. 35, 105, 231, 237, 280, 293; 1999 a. 5, 9.



State of Wisconsin
1999 - 2000 LEGISLATURE

LRBs04267
PJK.....

1
PJK
cjs

~~PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION~~

SENATE SUBSTITUTE AMENDMENT,

TO 1999 SENATE BILL 417

Now

gen cat

1 AN ACT ~~relating to~~; relating to: maintaining premiums under the health insurance
2 risk-sharing plan at current rates.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

3 SECTION 1. 20.435 (4) (af) of the statutes, as affected by 1999 Wisconsin Act 9,
4 is amended to read:

5 20.435 (4) (af) *Health insurance risk-sharing plan; transfer to fund for costs*
6 *and to maintain premium level.* The amounts in the schedule to be paid into the
7 health insurance risk-sharing plan fund to be used first for maintaining premiums
8 at the level specified in s. 149.143 (3c) and then for paying a portion of the operating
9 costs of the health insurance risk-sharing plan under ch. 149.

History: 1971 c. 125 ss. 138 to 155, 522 (1); 1971 c. 211, 215, 302, 307, 322; 1973 c. 90, 198, 243; 1973 c. 284 s. 32; 1973 c. 308, 321, 322, 333, 336; 1975 c. 39 ss. 153 to 173, 732 (1), (2); 1975 c. 41 s. 52; 1975 c. 82, 224, 292; 1975 c. 413 s. 18; 1975 c. 422, 423; 1975 c. 430 ss. 1, 2, 80; 1977 c. 29 ss. 236 to 273, 1657 (18); 1977 c. 112; 1977 c. 203 s. 106; 1977 c. 213, 233, 327; 1977 c. 354 s. 101; 1977 c. 359; 1977 c. 418 ss. 129 to 137, 924 (18) (d), 929 (55); 1977 c. 428 s. 115; 1977 c. 447; 1979 c. 32 s. 92 (11); 1979 c. 34, 48; 1979 c. 102 s. 237; 1979 c. 111, 175, 177; 1979 c. 221 ss. 118g to 133, 2202 (20); 1979 c. 238, 300, 331, 361; 1981 c. 20 ss. 301 to 336b, 2202 (20) (b), (d), (g);

1981 c. 93 ss. 3 to 8, 186; 1981 c. 298, 314, 317, 359, 390; 1983 a. 27 ss. 318 to 410, 2202 (20); 1983 a. 192, 199, 245; 1983 a. 333 s. 6; 1983 a. 363, 398, 410, 427; 1983 a. 435 ss. 2, 3, 7; 1983 a. 538; 1985 a. 24, 29, 56, 73, 120, 154, 176, 255, 281, 285, 332; 1987 a. 27, 339, 368, 398, 399, 402; 1987 a. 403 ss. 25, 256; 1987 a. 413; 1989 a. 31, 53; 1989 a. 56 ss. 13, 259; 1989 a. 102; 1989 a. 107 ss. 11, 13, 17 to 27; 1989 a. 120, 122, 173, 199, 202, 318, 336, 359; 1991 a. 6, 39, 189, 269, 275, 290, 315, 322; 1993 a. 16, 27, 76, 98, 99, 168, 183, 377, 437, 445, 446, 450, 469, 479, 490, 491; 1995 a. 27 ss. 806 to 961r, 9126 (19); 1995 a. 77, 98; 1995 a. 216 ss. 26, 27; 1995 a. 266, 276, 289, 303, 404, 417, 440, 448, 464, 468; 1997 a. 27 ss. 211, 214, 216, 247, 527 to 609; 1997 a. 35, 103, 231, 237, 280, 293; 1999 a. 5, 9.

1 **SECTION 2. 149.143 (1) (a) of the statutes, as affected by 1999 Wisconsin Act 9,**

2 is amended to read:

3 149.143 (1) (a) First from the moneys transferred to the fund from the
4 appropriation account under s. 20.435 (4) (af) for operating costs.

5 History: 1997 a. 27; 1999 a. 9.

5 **SECTION 3. 149.143 (2m) (a) 1. of the statutes, as created by 1999 Wisconsin Act**

6 9, is amended to read:

7 149.143 (2m) (a) 1. The amount of premiums received in a plan year from all
8 eligible persons, including amounts received for premium and deductible subsidies
9 and the amount transferred to the fund from the appropriation account under s.
10 20.435 (4) (af) for maintaining premiums at the level specified in sub. (3c).

11 History: 1997 a. 27; 1999 a. 9.

11 **SECTION 4. 149.143 (2m) (a) 2. of the statutes, as created by 1999 Wisconsin Act**

12 9, is amended to read:

13 149.143 (2m) (a) 2. The amount of premiums, including amounts received for
14 premium and deductible subsidies and the amount transferred to the fund from the
15 appropriation account under s. 20.435 (4) (af) for maintaining premiums at the level
16 specified in sub. (3c), necessary to cover 60% of the plan costs for the plan year, after
17 deducting the amount transferred to the fund from the appropriation account under
18 s. 20.435 (4) (af) for operating costs.

19 History: 1997 a. 27; 1999 a. 9.

19 **SECTION 5. 149.143 (3c) of the statutes is created to read:**

20 149.143 (3c) Notwithstanding subs. (1), (2) and (3), premium rates for eligible
21 persons with coverage under s. 149.14 may not exceed the rates in effect for those
22 eligible persons in the 1999–2000 fiscal year. Notwithstanding subs. (1), (2) and (3),

1 if premiums for eligible persons with coverage under s. 149.14 will be set under sub.
2 (2) (a) 2. or (3) (a) at rates that exceed the rates in effect in the 1999–2000 fiscal year,
3 the department shall use moneys appropriated under s. 20.435 (4) (af) to make up
4 the difference between the rates in effect in that fiscal year and the rates that are set
5 for a new plan year under sub. (2) (a) 2. or during a plan year under sub. (3) (a).

6 (END)

Kelly

- Robson's

6-2253

limit change - sub (s0426/1)

to 2 fiscal years - on July 1,

2002, stats would be same as

current law



State of Wisconsin
1999 - 2000 LEGISLATURE

LRBs0426/2

PJK:cjs:ch

rm not run

SENATE SUBSTITUTE AMENDMENT,
TO 1999 SENATE BILL 417

SOON
(3-20)

Inserts

in fiscal years 2000-01
and 2001-02

regenerate

1 AN ACT to amend 20.435 (4) (af), 149.143 (1) (a), 149.143 (2m) (a) 1. and 149.143
2 (2m) (a) 2.; and to create 149.143 (3c) of the statutes; relating to: maintaining
3 premiums under the health insurance risk-sharing plan at current rates:

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

4 SECTION 1. 20.435 (4) (af) of the statutes, as affected by 1999 Wisconsin Act 9,
5 is amended to read:

6 20.435 (4) (af) *Health insurance risk-sharing plan; transfer to fund for costs*
7 *and to maintain premium level.* The amounts in the schedule to be paid into the
8 health insurance risk-sharing plan fund to be used first for maintaining premiums
9 at the level specified in s. 149.143 (3c) and then for paying a portion of the operating
10 costs of the health insurance risk-sharing plan under ch. 149.

11 SECTION 2. 149.143 (1) (a) of the statutes, as affected by 1999 Wisconsin Act 9,
12 is amended to read:

Sect 1-10

1 149.143 (1) (a) First from the moneys transferred to the fund from the
2 appropriation account under s. 20.435 (4) (af) for operating costs.

3 **SECTION 3.** 149.143 (2m) (a) 1. of the statutes, as created by 1999 Wisconsin Act
4 9, is amended to read:

5 149.143 (2m) (a) 1. The amount of premiums received in a plan year from all
6 eligible persons, including amounts received for premium and deductible subsidies
7 and the amount transferred to the fund from the appropriation account under s.
8 20.435 (4) (af) for maintaining premiums at the level specified in sub. (3c).

9 **SECTION 4.** 149.143 (2m) (a) 2. of the statutes, as created by 1999 Wisconsin Act
10 9, is amended to read:

11 149.143 (2m) (a) 2. The amount of premiums, including amounts received for
12 premium and deductible subsidies and the amount transferred to the fund from the
13 appropriation account under s. 20.435 (4) (af) for maintaining premiums at the level
14 specified in sub. (3c), necessary to cover 60% of the plan costs for the plan year, after
15 deducting the amount transferred to the fund from the appropriation account under
16 s. 20.435 (4) (af) for operating costs.

17 **SECTION 5.** 149.143 (3c) of the statutes is created to read:

18 149.143 (3c) Notwithstanding subs. (1), (2) and (3), premium rates for eligible
19 persons with coverage under s. 149.14 may not exceed the rates in effect for those
20 eligible persons in the 1999-2000 fiscal year. Notwithstanding subs. (1), (2) and (3),
21 if premiums for eligible persons with coverage under s. 149.14 will be set under sub.
22 (2) (a) 2. or (3) (a) at rates that exceed the rates in effect in the 1999-2000 fiscal year,
23 the department shall use moneys appropriated under s. 20.435 (4) (af) to make up

for fiscal year 2000-01 or 2001-02

in fiscal years 2000-01 and 2001-02

1999-2000

① the difference between the rates in effect in ~~the~~ fiscal year and the rates that are set

② ~~will be the same as~~ under sub. (2) (a) 2. or ~~will be the same as~~ sub. (3) (a).

3

(END)

Insert 3-2

for fiscal year

2000-01 or 2001-02

1999-2000 DRAFTING INSERT
FROM THE
LEGISLATIVE REFERENCE BUREAU

LRBs0426/lins
PJK:cjs:ch

INSERT 1-10

create
auto
ref 1
↓

① SECTION 1. 20.435 (4) (af) of the statutes, as affected by 1999 Wisconsin Act ...

2 (this act), is amended to read:

3 20.435 (4) (af) *Health insurance risk-sharing plan; transfer to fund for costs*
4 ~~and to maintain premium level.~~ The amounts in the schedule to be paid into the
5 health insurance risk-sharing plan fund ~~to be used first for maintaining premiums~~
6 ~~at the level specified in s. 149.143 (3c) and then for paying a portion of the operating~~
7 costs of the health insurance risk-sharing plan under ch. 149.

(END OF INSERT 1-10)

create
auto
ref 2
↓

INSERT 2-2

⑧ SECTION 2. 149.143 (1) (a) of the statutes, as affected by 1999 Wisconsin Act ...

9 (this act), is amended to read:

10 149.143 (1) (a) First from the moneys transferred to the fund from the
11 appropriation account under s. 20.435 (4) (af) ~~for operating costs.~~

(END OF INSERT 2-2)

create
auto
ref 3
↓

INSERT 2-8

⑫ SECTION 3. 149.143 (2m) (a) 1. of the statutes, as affected by 1999 Wisconsin

13 Act ... (this act), is amended to read:

14 149.143 (2m) (a) 1. The amount of premiums received in a plan year from all
15 eligible persons, including amounts received for premium and deductible subsidies
16 and the amount transferred to the fund from the appropriation account under s.
17 20.435 (4) (af) ~~for maintaining premiums at the level specified in sub. (3c).~~

(END OF INSERT 2-8)

INSERT 2-16



*create
auto ref 4*
↓

- ① SECTION 4. 149.143 (2m) (a) 2. of the statutes, as affected by 1999 Wisconsin
2 Act (this act), is amended to read:
3 149.143 (2m) (a) 2. The amount of premiums, including amounts received for
4 premium and deductible subsidies ~~and the amount transferred to the fund from the~~
5 ~~appropriation account under s. 20.435 (4) (af) for maintaining premiums at the level~~
6 ~~specified in sub. (3e), necessary to cover 60% of the plan costs for the plan year, after~~
7 ~~deducting the amount transferred to the fund from the appropriation account under~~
8 ~~s. 20.435 (4) (af) for operating costs.~~

(END OF INSERT 2-16)

INSERT 3-2

- 9 SECTION 5. 149.143 (3c) of the statutes, as created by 1999 Wisconsin Act
10 (this act), is repealed.

- 11 SECTION 6. Effective dates. This act takes effect on the day after publication,
12 except as follows:

- use auto ref 2*
⑬ (1) The treatment of sections 20.435 (4) (af) (by SECTION *use auto ref 1*) and 149.143 (1) (a)
use auto ref 3
⑭ (by SECTION *use auto ref 3*) and (2m) (a) 1. (by SECTION *use auto ref 4*) and 2. (by SECTION *use auto ref 4*) of the statutes and
15 the repeal of section 149.143 (3c) of the statutes take effect on July 1, 2002.

(END OF INSERT 3-2)